


"Pactra Coatings" is still conducting business on the site - Pactra is 420 S. 11th Ave, Altawood is Suite A" per TFC 8/16/94

QC RCR15 8/17/94 EB

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

<p>Please refer to the Instructions for Filing: Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).</p>		 <h1>Notification of Regulated Waste Activity</h1> <p>United States Environmental Protection Agency</p>		<p>Date Received (For Official Use Only)</p> <p>AUG 16 1994</p>	
<b>I. Installation's EPA ID Number (Mark 'X' in the appropriate box)</b>					
<input checked="" type="checkbox"/> A. First Notification		<input type="checkbox"/> B. Subsequent Notification (complete item C)		<b>C. Installation's EPA ID Number</b>	
				C A 0 0 0 0 5 8 9 7 6 2	
<b>II. Name of Installation (Include company and specific site name)</b>					
A L T A W O O D , I N C .					
<b>III. Location of Installation (Physical address not P.O. Box or Route Number)</b>					
<b>Street</b>					
4 2 0 S . 1 1 T H A V E N U E S U I T E A					
<b>Street (continued)</b>					
<b>City or Town</b>				<b>State</b>	<b>ZIP Code</b>
U P L A N D				CA	9 1 7 8 6 -
<b>County Code</b>		<b>County Name</b>			
0 7		S A N B E R N A R D I N O			
<b>IV. Installation Mailing Address (See Instructions)</b>					
<b>Street or P.O. Box</b>					
P . O . B O X 1 1 5 0					
<b>City or Town</b>				<b>State</b>	<b>ZIP Code</b>
U P L A N D				CA	9 1 7 8 5 - 1 1 5 0
<b>V. Installation Contact (Person to be contacted regarding waste activities at site)</b>					
<b>Name (last)</b>			<b>(first)</b>		
L i t t l e t o n			M i k e		
<b>Job Title</b>			<b>Phone Number (area code and number)</b>		
O P E R A T I O N S M A N .			9 0 9 - 9 3 1 - 1 5 3 1		
<b>VI. Installation Contact Address (See Instructions)</b>					
<b>A. Contact Address Location</b>		<b>B. Street or P.O. Box</b>			
<input type="checkbox"/> Location <input checked="" type="checkbox"/> Mailing		P . O . B O X 1 1 5 0			
<b>City or Town</b>				<b>State</b>	<b>ZIP Code</b>
U P L A N D				CA	9 1 7 8 5 - 1 1 5 0
<b>VII. Ownership (See Instructions)</b>					
<b>A. Name of Installation's Legal Owner</b>					
H E R B E R T E . G L E I C K E					
<b>Street, P.O. Box, or Route Number</b>					
P . O . B O X 1 1 5 0					
<b>City or Town</b>				<b>State</b>	<b>ZIP Code</b>
U P L A N D				CA	9 1 7 8 5 - 1 1 5 0
<b>Phone Number (area code and number)</b>		<b>B. Land Type</b>	<b>C. Owner Type</b>	<b>D. Change of Owner Indicator (Date Changed)</b>	
9 0 9 - 9 3 1 - 1 5 3 1				Month Day Year	
				Yes No	

8/16/94  
per TFC 8/16/94  
EB  
14 SL 8/16/94  
per PO FINDS  
Not in CS  
per FS FINDS  
per CS  
Pactra Coatings  
420 S. 11th Ave  
PACS CAD04875655

2N

ID - For Official Use Only

## VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

## A. Hazardous Waste Activity

1. Generator (See instructions)
- ☐ a. Greater than 1000kg/mo (2,200 lbs.)
- ☒ b. 100 to 1000 kg/mo (220 - 2,200 lbs.)
- ☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- ☐ a. For own waste only
- ☐ b. For commercial purposes
- Mode of Transportation
- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify \_\_\_\_\_
3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Boiler and/or Industrial Furnace
- ☐ 1. Smelter Refractor
- ☐ 2. Small Quantity Exemption
- Indicate Type of Combustion Device(s)
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

## B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner - indicate device(s) - Type of Combustion Device
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

## IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)
2. Corrosive (D002)
3. Reactive (D003)
4. Toxicity Characteristic (D000)

(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

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B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1
F002
7

2
F003
8

3
F004
9

4
F005
10

5

6

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number. See instructions.)

1

2

3

4

5

6

## X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Mike Littleton

Name and Official Title (type or print)

MIKE LITTLETON OPERATIONS

Date Signed

8/12/94

## XI. Comments

(RCRA Solvents) Please expedite

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)